IN THE UNITED STATES DISTRICT COURT FOR NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

)

FEB 0 8 2008

MICHAEL W. DOBBINS
GLERK, U.S. DISTRICT COURT

FEB 0 8 2008

JOSEPH COLLINS,

Plaintiff,

VS.

UNITED STATES OF AMERICA and TRANSPORTATION SECURITY ADMINISTRATION,

Defendants.

08CV851 JUDGE GETTLEMAN MAGISTRATE JUDGE DENLOW

COMPLAINT

- Plaintiff is an individual residing at 356 W. Scott Street, Chicago, Illinois in Cook
 County.
- 2. Defendant United States of America is a sovereign entity who has waived the sovereign immunity as to the United States under the Federal Tort Claims Act, 28 U.S.C. § 2674 et seq.
- 3. Defendant Transportation Security Administration ("TSA") is an agency of the United States Department of Homeland Security, and maintains its claims management office at 601 12th Street South, Arlington, Virginia.
- 4. Plaintiff filed an administrative claim with TSA on or about April 26, 2007. A true and correct copy of which is attached as Exhibit A. TSA never sent by certified or registered mail a final written denial of Plaintiff's claim, as required under 28 U.S.C.A. § 2675(a) and 28 CFR § 14.9. Because six (6) months has elapsed since the filing of Plaintiff's administrative claim, Plaintiff is now entitled to institute this action pursuant to 28 U.S.C.A. § 2675(a).

- Jurisdiction is proper pursuant to U.S.C.A. § 1346(b)(1) and 28 U.S.C. § 1402(b). 5.
- Venue is proper under 28 U.S.C.A. § 1391(e) because Plaintiff is a resident of 6. Cook County, Illinois.
- On April 24, 2007 Plaintiff boarded American Airlines Flight 1283, scheduled to 7. depart from Miami International Airport at 7:15 p.m. E.S.T. and to arrive at Chicago O'Hare International Airport at 9:15 p.m. C.S.T.
- Around approximately 5:30 p.m. E.S.T., Plaintiff checked his suitcase with TSA 8. employees near the X-Ray machine after completing American Airlines First-Class check-in at Miami International Airport.
- Prior to checking his suitcase, Plaintiff placed his Rolex Perpetual Datejust watch 9. inside a zippered pocket of a toiletries bag, and packed the toiletries bag at the bottom of the suitcase underneath one week's worth of clothes and study materials.
- When Plaintiff arrived home later that evening and unpacked his belongings, 10. Plaintiff discovered that his Rolex watch had been removed from the bag. Whoever took the watch had enough time to carefully unpack the suitcase, unzip the toiletries bag, remove the watch, and re-pack the items in the same manner, thereby creating the appearance that nothing unusual had occurred.
- Given the fact that (i) the watch was concealed in the toiletries bag, and (ii) the 11. toiletries bag was placed at the bottom of the suitcase and buried under clothes and books, only a thorough search of his luggage or use of an X-ray machine would enable someone to locate the watch inside the suitcase. Moreover, only TSA employees would have the time to remove the watch in such a surgical manner.

CHGO1\31152986.1 2

- 12. Plaintiff learned through subsequent investigation that several TSA employees, including employees working at Miami International Airport, had been previously arrested, charged and/or convicted for theft of passengers' personal belongings, including jewelry.
- 13. The replacement value of the watch is estimated to be at least \$3,000.00. Attached hereto and marked as Exhibit B is a copy of Plaintiff's receipt for his watch. Plaintiff's watch has additional sentimental value, because it was given to him by his wife as a wedding gift.
 - 14. Defendants owed the following duties to Plaintiff:
 - a) to carefully and properly handle Plaintiff's luggage and otherwise secure his personal belongings;
 - b) provide adequate security to protect Plaintiff's luggage from theft and/or loss;
 - c) to properly handle Plaintiff's luggage to prevent theft and/or loss;
 - to screen its employees and educate and train them regarding the care of luggage;
 - e) to secure the baggage handling area at the point of departure;
 - f) to provide proper safeguards and surveillance to detect the wrongful acts of TSA employees; and
 - g) any other and further duty that may be revealed through the process of discovery.
 - 15. Defendants breached all or some of the aforementioned duties.
- 16. As a direct and proximate result of Defendants' negligent and wrongful acts and omissions, the Plaintiff sustained damages in the nature of lost or stolen jewelry and other losses.

WHEREFORE, Plaintiff demands a jury trial and judgment in his favor and in excess of \$3,000.00, together with litigation attorneys' fees and expenses, post-judgment interest, and any other and further relief this Court deems appropriate.

CHGO1\31152986.1 3

Respectfully submitted,

Joseph Collins

Joseph Collins 356 W. Scott St. Chicago, IL 60610 Phone: (312) 440-0593

EXHIBIT A

CLAIM FOR DAMAG INJURY, OR DEATH	supply in	INSTRUCTIONS: Please read carefully the instructions on the reverse side and supply information requested on both sides of the form. Use additional sheet(s) if necessary. See reverse side for additional instructions.				
Submit To Appropriate Federal	Agency:					nal representative, if any,
Claims Management Office (TS)	A-9)		·			rity, State and Zip Code)
Transportation Security Adminis	tration		Σ 05€γ	H COLL	INS	
601 12th Street South			356	w. SCOT	TT 5T	
Arlington, VA 22202-4220	Phone: (8	66) 289-9673		•		
71 81 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1	60,14	-	
3. TYPE OF EMPLOYMENT 4, DA		RITAL STATUS KIEL	6. DATE AND D 04/24		NT	7. TIME (A.M. or P.M.)
MILITARY CIVILIAN 3/7 8. Basis of Claim (State in detail to						P, M .
involved, the place of occurren	nce and the cause ther	eof) (Use additie	onal pages if nec	essary.)	airi, idaniiriying pers	ons and property
ON APRIL 24, 20	07, I DERA	RIED ON	JAF461	IT FROM		
AMERICAN AIRLI	NES FLIGH	11 1983	, DEPAN	2T(N)C A	T 7115 E	ST AND
ARRIVING AT 9	15 CST, A	ROUND A	YPRROXIM	ATELY 5	5:30 EST	I CHECKED
MY SUITCASE ACA	oss From	AMERIC	ANAIRL	INES AT	r miami in	TERNATIONAL
AUDRORT, TRACKET	MY ROLEX	WATCH	WSIDE A	4√ 1~√⊝≪	2 POCKET (oF mY
This ETRIES AA/a	AND PUT T	HE BAG	NSIDE	THE SUI	TCASE , L	UHEN I
TOILETRIES BAG ARRIVED HOME A	AN UNICACY	FNTA	15CAVEY	REN THA	47 745 1	ATCH WAS
STOLEN FROM TH	HE BAG. O	NCY AN	XXXXY W	IDULIS IQ	2 THE WY	₹(ÇH,
9.		PRÓPERTY				· · · · · · · · · · · · · · · · · · ·
NAME AND ADDRESS OF OWNER			er, street, city, Si	tate, and Zip Co	de)	
		ころろ何				
BRIEFLY DESCRIBE THE PROPERT						
Instructions on reverse side.)	LEX WATCH	1, moio	J_ 1521	Ø,S⊟RK	LLX Paø68	371
200	TAIL \$290	വ്വര	PAIN #	:3500.0	[']	
	AND THE RESIDENCE OF THE PARTY					
10,			RONGFUL DEAT		70 10 A A A A A A A A A A A A A A A A A A	
STATE NATURE AND EXTENT OF STATE NAME OF INJURED PERSO		USE OF DEATH	, WHICH FORMS	HE BASIS OF	THE CLAIM. IF OT	HER THAN ÇLAIMANT,
7, 2						
		こここ	<u>-</u>			
11,		WITNES	SSES		· · · · · · · · · · · · · · · · · · ·	
NAME		3.7411	ADDRESS	(Number, street	t, city, State, and Zij	p Code)
NONE			ľ	ころとの		
, '						
			<u> </u>			
12. (See instructions on reverse) 12a. PROPERTY DAMAGE		MOUNT OF CLA		DE 1711	Lini Toric (C.)	
i i	12b. PERSONAL INJU	ין זאכ	2c. WRONGFUL		forfeiture of	re to specify may cause
<i>\$2</i> 900.00	NONE		ろりろ	Ē	\$290	
I CERTIFY THAT THE AMOUNT OF	CLAIM COVERS ONL	Y DAMAGES A	ND INJURIES CA	AUSED BY THE A		
SAID AMOUNT IN FULL SATISFACTION OF CLAIMANT (HIS CLANVI.	12h Bhain an	mber of signatory	14. DATE OF CLAIM
Toa. Sidney Topic of Certification		たいさた タレハた・ノ		. 130. FROME RU	_ i	14. DATE OF CLAIM
	7 11/1/			1 /		
(Jana !				(31a) 36	8-2143	4/26/2007
	FOR PRESENTING		CRII	<u>!</u> MINAL PENALTY	Y FOR PRESENTING	FRAUDULENT
	rll_		CRII	<u>!</u> MINAL PENALTY	· ' /	FRAUDULENT
FRAUDU The claimant shall forfeit and par	FOR PRESENTING LENT CLAIM y to the United States		ľ	MINAL PENALTY CLAIM OR MA	Y FOR PRESENTING AKING FALSE STATI	FRAUDULENT
FRAUDU	FOR PRESENTING LENT CLAIM y to the United States		Fine of not me	MINAL PENALTY CLAIM OR MA	Y FOR PRESENTING AKING FALSE STATI O or imprisonment f	FRAUDULENT EMENTS

95-109
Previous editions not usable.
Designed using Perform Pro, WH5/DIOR, Jun 98

NSN 7540 00-634-4046

STANDARD FORM 95 (Rev. 7-85) (EG) PRESCRIBED BY DEPT. OF JUSTICE 28 CFR 14.2

PRIVACY ACT NOTICE

This Notice is provided in accordance with the Privacy Act, 5 U.S.C. 552a(e)(3), and B. Principel Purpose: The information requested is to be used in evaluating claims. concerns the information requested in the letter to which this Notice is attached. A. Authority: The requested information is solicited pursuant to one or more of the following: 5 U.S.C. 301, 38 U.S.C. 501 et seq., 28 U.S.C. 2671 et seq., 28 C.F.R.

- C. Routine Use: See the Notices of Systems of Records for the agency to whom you are submitting this form for this information.
- Effect of Fallure to Respond: Disclosure is voluntary. However, failure to supply the requested information or to execute the form may render your claim "invalid",

INSTRUCTIONS

Complete all Items - Insert the word NONE where applicable

A CLAIM SHALL BE DEEMED TO HAVE BEEN PRESENTED WHEN A FEDERAL AGENCY RECEIVES FROM A CLAIMANT, HIS DULY AUTHORIZED AGENT, OR LEGAL REPRESENTATIVE AN EXECUTED STANDARD FORM 95 OR OTHER WRITTEN NOTIFICATION OF AN INCIDENT, ACCOMPANIED BY A CLAIM FOR MONEY DAMAGES IN A <u>SUM CERTAIN</u> FOR INJURY TO OR LOSS OF

Part 14.

Any instructions or information necessary in the preparation of your claim will be furnished, upon request, by the office indicated in Item #1 on the reverse side. Complete regulations pertaining to claims asserted under the Federal Tort Claims Act can be found in Title 28, Code of Federal Regulations, Part 14. Many agencies have published supplemental regulations also. If more than one agency is involved, please state each agency

The claim may be filed by a duly authorized agent or other legal representative, provided evidence satisfactory to the Government is submitted with said claim establishing express authority to act for the claimant. A claim presented by an agent or legal representative must be presented in the name of the claimant. If the claim is signed by the agent or legal representative, it must show the title or legal capacity of the person signing and be accompanied by evidence of his/her authority to present a claim on behalf of the claimant as agent, executor, administrator, perent, guardien or other representative.

If claimant intends to file claim for both personal injury and property damage, claim for both must be shown in Item 12 of this form.

The amount claimed should be substantiated by competent evidence as follows: (e) in support of the claim for personal injury or death, the claimant should submit a written report by the attending physician, showing the nature and extent of injury, the nature and extent of treatment, the degree of permanent disability, if any, the prognosis, and the period of hospitalization, or incapacitation, attaching itemized bills for medical, hospital, or burial expenses actually incurred.

PROPERTY, PERSONAL INJURY, OR DEATH ALLEGED TO HAVE OCCURRED BY REASON OF THE INCIDENT. THE CLAIM MUST BE PRESENTED TO THE APPROPRIATE FEDERAL AGENCY WITHIN TWO YEARS AFTER THE CLAIM ACCRUES.

(b) in support of claims for damage to property which has been or can be economically repaired, the claimant should submit at least two itemized signed statements or estimates by reliable, disinterested concerns, or, if payment has been made, the itemized signed receipts evidencing payment.

(c) In support of claims for damage to property which is not economically repairable, or if the property is lost or destroyed, the claimant should submit statements as to the original cost of the property, the date of purchase, and the value of the property, both before and after the accident. Such statements should be by disinterested competent persons, preferably reputable dealers or officials familiar with the type of property damaged, or by two or more competitive bidders, and should be certified as being just and correct.

(d) Failure to completely execute this form or to supply the requested material within two years from the date the allegations accrued may render your claim. "invalid". A claim is deemed presented when it is received by the appropriate agency, not when it is mailed.

Failure to specify a sum certain will result in invalid presentation of your claim and may result in forfeiture of your rights.

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden

to Director, Torts Branch	and to the			
Civil Division	Office of Management and Budget			
U.S. Department of Justice	Paperwork Reduction Project (1105-0008)			
Washington, DC 20530	Washington, DC 20503			
	INSURANCE COVERAGE			
In order that subrogation claims may be adjud	cated, it is essential that the claimant provide the following information regarding	ng the insurance coverage of his vehicle or property.		
15. Do you carry accident insurance?	Yes, If yes, give name and address of insurance company (Number, stre	per, city, Stete, and Zip Codel and policy number. 🔀 No		
		[
16. Have you filed claim on your insurance	carrier in this instance, and if so, is it full coverage or deductible?	17. If deductible, state amount		
,	10			
ľ	10			
10 M states has been filled with any angles				
16. If claim has been filed with your carrier,	what action has your insurer taken or proposes to take with reference to y	OUR CIDIMIT (It is necessary that you escertein these facts)		
//	ONE			
. •	- 1-02			
19. Do you carry public liability and propert	y damage insurance? Yes, If yes, give name and address of insurance comp.	any (Number, Street, city, State, and Zip Cude) No		
, , , , ,	,			

SUPPLEMENTAL INFORMATION - SF-95 CLAIM FOR DAMAGE, INJURY, OR DEATH
INSTRUCTIONS: Please include information for boxes 1-10. Failure to provide accurate information may delay your claim while the information is collected.
1. Name: JOSEPH COLLINS
Email Address: joseph, collins adlapiper.com
2. Did the incident take place at: (Please check one)
Passenger Security Screening Checkpoint? Checked Baggage Screening Location?
3. At which Airport did the incident occur? MIAMI INTERNATIONAL AIRPORT
4. Did you use Skycap, Porter Service, or other third party baggage service?
5. If this was a checked baggage incident, why do you believe that TSA was responsible? MY WATCH WAS IN THE INNER POCKET OF A
TOILETRIES BAG THAT WAS BURIED IN MY SUITCASE.
ONLY AN XRAY WOULD SPOT THE WATCH.
6. Was your checked baggage delayed? YES NO NO For how long?
7. Please write down your complete travel itinerary (Airline names, flight numbers, arrival/departure times, etc.)
AMERICAN AIRLINES FLIGHT 1283, DEPART 7:15 PM EST
Please include baggage tag numbers from baggage involved in the incident: ARRIVE 9.15 PM CST
6¢¢1316755
8. At the time of the incident, were you in the Military or a Federal YES NO Employee and on official travel?
9. Did you file any type of incident report with the airport, airline, TSA, or any law enforcement agency? A A B NO
10. Claimant Signature:
PLEASE ATTACH ALL RECEIPTS, ESTIMATES OF REPAIR, APPRAISALS OR ANY OTHER DOCUMENTS THAT CAN SUBSTANTIATE THE VALUE OF THE ITEMS THAT WERE LOST OR DAMAGED.
FOR ALL DAMAGED BAGGAGE, YOU MUST GET A REPAIR ESTIMATE
Paperwork Reduction Act Statement of Public Burden: TSA is collecting this information in order to thoroughly investigate and resolve your tort claim against the agency. The public burden for this collection of information is estimated to be approximately 30 minutes. This is a voluntary collection of information; however, failure to provide this information may delay or hinder the processing of your claim. An agency may not conduct or sponsor, and persons are not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number assigned to this collection is 1652-0039, which expires 08/31/2009.
Privacy Act Statement: AUTHORITY: 28 U.S.C. 1348(b), 1402(b), 2671-2680. PRINCIPAL PURPOSE(S): This Information will be used to investigate your claim against the Transportation Security Administration (TSA). ROUTINE USE(S): This information may be shared with the Department of Justice in review, settlement, defense, and prosecution of claims involving matters over which TSA exercises jurisdiction, or for routine uses identified in the TSA's system of records notice, DHS/TSA 009 General Legal Records. DISCLOSURE: Voluntary; fallure to furnish the requested information may result in an inability to thoroughly investigate your claim and may therefore result in an inability to award you payment on your claim.

EXHIBIT B

GREGG HELFER, Ltd.

5 South Wabash Suite 1416 Chicago, Illinois 60603 (312) 920-0970 FAX 920-0971

INVOICE

Date	Invoice #
2/8/2001	186

Bill To			• .	
Joe and Nar 711 South E #307 Chicago, II	Pearborn Str	cct		

Ship To		
Joe Collins 521 Welling Dyer, IN 46	ton Drive	

			Terms		Via
			On Rece	ipt	Federal Express
Quantity	Item Code	Description		Price Each	Amount
1	WATCH114 Shipping/Insurance Shipping/Insurance	GENTS ROLEX OYSTER PERFETUASTAINLESS/ BLACK DIAL. MODEL # P206871: RETAIL \$2900.00 FEDERAL EXPRESS OVERNIGHT II SUPPLIER TO GHL FEDERAL EXPREDD OVERNIGHT II GHL TO CUSTOMER	# 15210 SERIAL NSURED FROM NSURED FROM	2,500,00 25.00 25.00	2,500,007 25,00 25.00
HANK YOU FOR UTURE REFERRA	Your Business. W Ls	E APPRECIATE YOUR CONFIDENCE	Sub	total	\$2,550.00
*			Sale	es Tax (0.0%)	\$0.00
			Tota	al	\$2,550.00
·	:	•	Pay	ments/Credits	\$-2,550.00
			Bal	ance Due	\$0.00

All sales are final unless other arrangements are made in writing, attached to this invoice and signed by an officer of Gregg Helfer, Ltd.